

Signature on File

REPORT OF RECEIPTS AND EXPENDITURES OF A POLITICAL COMMITTEE:

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14) (CFA-4) Summary Sheet

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TOTAL PAGES IN ENTIRE CFA-4 REPORT

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INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

IS	THIS AN	AMENDMENT?	Yes	No
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COMMITTEE INFORMATION			
Full Name of Committee (as on Statement of Organization) Check if this is a new	name	TRUCTIONS FOR	SPECIAL INS
Judy LEVINE FOR COUNTY COUNCIL		ONA ESTACIONAS)
Acronym or Abbreviated Name (if any)	3. Commit	tee Telephone Number	CERTAIN POI
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	Check if this is	a new address 2//	num man bevece /se
11536 GIEN RIDGE CIRCLE	The state of	A.F. by periodich year	T DO REG EMPORES, ALIONA
5. City, State, ZIP Code		filiation (if applicable)	
FISHERS IN 46037-3823		PUBLICAN	
CANDIDATE INFORMATION (For Candidate's			at Condidate
7. Full Name of Candidate (include any nickname) Judy R. LEVINE	-	ffiliation or If Independe	
	-	PUBLICAN	ense sanzene you grious
9. Office Sought (Include district number, if any. Not required for exploratory committee.) COUNTY COUNCIL DISTRICT 2		mil ToN	
TYPE OF REPORT		CONVENTIO	N CANDIDATES ONLY
11. Check one:	If I you should	Check one:	Organization (Parm CPA
Pre-Primary Pre-Election Annual Nomination Other		Pre-Conv	
Final/Disbands Committee (lines 18, 19, and 20 must be "0") Outgoing Treasurer (within 10 days amend Statement	of Organization)	Post-Cor	nvention
12. Reporting Period:	Dans Duip	COLUMN A	COLUMN B
From: 1-1-05 Through: 12-31-05		This Period	Year to Date
13. Cash on hand and investments at the beginning of this reporting period.	ó	2,519.99	
14. Cash on hand and investments January 1, current year.	and short		2,519.99
CONTRIBUTIONS AND RECEIPTS	*****		
(Note: these amounts include in-kind contributions and loans, as well as cash contributions.) 15a. Itemized (use Schedule A)	nest St. san	NAME OF THE OWNER, OWNER, OWNER, OWNER,	E-HARMAN STATE
15b. Uniternized		+	-6
The state of the s	TOTAL		~
	TOTAL	-	-
16. Add lines 13 and 15c in Column A and lines 14 and 15c in Column B EXPENDITURES	TOTAL		
(Note: These amounts include in-kind expenditures and loan repayments.)			and the second of the second
17a. Itemized (use Schedule B) (Public Question: use Schedule C)	100 0 000	-0-	0
17b. Unitemized	tistre oris	-0-	0
17c. Add lines 17a and 17b in both columns	BTOTAL	-0	-0-
18. Cash on hand and investments at close of this reporting period (subtract 17c from 16 in both columns)	TOTAL	-0-	0
19. Debts OWED BY the committee (use Schedule D)		5,000 000	
20. Debts OWED TO the committee (use Schedule E)		5,000.00	
	-		FOR OFFICE USE ONLY
CERTIFICATION		Latin Colonia State Colonia St	OK OFFICE USE ONLY

files a fraudulent eport commits a Class B felony. (IC 3-14-1-13) A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdementor. (IC 2-14-1-14) and markle substitution in the Indiana Campaign Finance Law commits a Class B misdementor.

I CERTIEV THAT I HAVE EVAMINED THIS STATEMENT. TO THE DEST OF MY VAIONI EDGE AND DELICE IT IS TOLIC CORDECT AND COMDICT



State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-1) CONTRIBUTIONS BY INDIVIDUALS Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from individuals OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee). A contributor's occupation is required if an individual makes at least \$1,000 in contributions during the calendar year. Otherwise, this is optional.

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CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
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Contributor's Occupation (if required)	apengos ebsm asri oriw is	abivibili yna lo a	or the occupation	MEATION: SH
2. For in-total contributions mescribe are	Contributions: Direct In-Kind (describe)	HER RECEIPT:	то яо иопти	"consulant." E OF CONTRI
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Contributor's Occupation (if required)5.	Contributions: Direct In-Kind (describe)			
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Contributor's Occupation (if required)				
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State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-2) CONTRIBUTIONS BY CORPORATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY CORPORATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from corporations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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Same 1	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS (street, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
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	bons, including In-land, transfers-in of other	Other Receipts: Interest Loan Misc. (specify)	NR-TO-DATE: En		eceipts for this column B C1 eceipts calend
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State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-3) CONTRIBUTIONS BY LABOR ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY LABOR ORGANIZATIONS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from labor organizations OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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Barrier St.	CONTRIBUTOR'S FULL NAME AND FULL MAILING ADDRESS treet, number, city, state, ZIP code)	TYPE OF CONTRIBUTION OR OTHER RECEIPT	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE RECEIVED RECEIVED BY
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3.	as the entry in Column A. d. For checks and money enters indicaccount, NOT the date it was written posited in the committee's account.	Contributions: Direct In-Kind (describe)	c year, the entry day, and year the se check or more contributions are	of each calend; Enter the month than deposited the introbutions, the	to hist report E RECEIVED: Sate the comin ad. For cash or
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State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-4) CONTRIBUTIONS BY

POLITICAL ACTION COMMITTEES

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY POLITICAL ACTION COMMITTEES ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from political action committees OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from political action committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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2.	ipts over \$100 within a calendar year (\$200 navinee's account.	Contributions:	inthoc lie le east	obe polken bas	amen flut ant ya
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	cox. For in-kind contributions describe ma mailings, etc.). For "miscellaneous", be as	Other Receipts: Interest Loan Misc. (specify)	THEN RECEIPT South as yard	BUTTON OR C	eral product of
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3.	including in-kind, transfers-in or other	Contributions; Direct In-Kind (describe)	TO-DATE: Ent	orting period	aipte for this reg LUMN B CUM
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State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE A-5) CONTRIBUTIONS BY OTHER ORGANIZATIONS

Itemized Contributions and Other Receipts

INSTRUCTIONS: LIST ONLY CONTRIBUTIONS BY ORGANIZATIONS OTHER THAN CORPORATIONS, LABOR ORGANIZATIONS, POLITICAL ACTION COMMITTEES AND INDIVIDUALS ON THIS SCHEDULE. Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document contributions and receipts totaled on ITEM 15a of the Summary Sheet. All cumulative contributions from other entities OVER \$100 per contributor, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All transfers-in and in-kind contributions regardless of amount from candidate's, legislative caucus, and regular party committees MUST be itemized on this schedule. All cumulative receipts, (such as loan proceeds and repayments, refunds, rebates, returns of deposit, proceeds from sales, interest or other income) OVER \$100 per contributor, within a calendar year, MUST be itemized on this schedule (over \$200 if regular party committee).

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	CONTRIBUTOR'S FULL NAME AND	TYPE OF CONTRIBUTION	COLUMN A	COLUMN B	DATE RECEIVED
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(CFA-4 SCHEDULE B) ITEMIZED EXPENDITURES

State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. This schedule is used to document expenditures totaled on ITEM 17a of the Summary Sheet. All cumulative expenses paid to individuals, businesses, labor organizations and other entities OVER \$100 per recipient, within a calendar year MUST be itemized on this schedule (over \$200, if regular party committee). All cumulative expenses, including in-kind, regardless of amount paid to political committees, (such as transfers-out from candidate, legislative caucus, political action, or regular party committees) MUST be itemized on this schedule.

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RECIPIENT'S NAME AND MAILING ADDRESS (street, number, city, state, ZIP code)	RECIPIENT'S OCCUPATION OFFICE SOUGHT (if applicable)	TYPE OF EXPENDITURE and PURPOSE (be specific)	COLUMN A AMOUNT THIS PERIOD	COLUMN B CUMULATIVE YEAR-TO-DATE	DATE OF EXPENDITURE
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State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14) (CFA-4 SCHEDULE C)
ITEMIZED EXPENDITURES
For Public Questions

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. All cumulative expenses or transfers-out, regardless of amount paid to political committees supporting or opposing a public question, MUST be itemized on this schedule.

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State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE D) DEBTS OWED BY THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED BY the committee during the reporting period. Include all amounts owed for or to lend institutions, individuals, credit purchases, committee credit card accounts, etc. List each vendor paid by credit card issued in the name of the committee in the ENDORSER'S column. A lender's occupation is required if an individual makes loans of at least \$1,000 during the calendar year. Otherwise, this is optional.

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CREDITOR'S OR LENDER'S NAME	ENDORSER'S OR VENDOR'S NAME & MAILING ADDRESS (if any) (street, number, city, state, ZIP code)	AMOUNT	DATE DEBT	CUMULATIVE PAID YEAR-TO-DATE	OUTSTANDING BALANCE THIS PERIOD
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State Form 4606 (R13/11-05) Indiana Election Commission (IC 3-9-5-14)

(CFA-4 SCHEDULE E) DEBTS OWED TO THIS COMMITTEE

INSTRUCTIONS: Please type or print legibly IN BLACK INK all information on this schedule. For assistance in completing this schedule, see instructions on the reverse side. List all debts and loans, regardless of the amount, OWED TO the committee during the reporting period. Include all amounts the committee has loaned to others.

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Page	of			

BORROWER'S NAME & MAILING ADDRESS	CO-SIGNER'S NAME & MAILING ADDRESS (if any)	ORIGINAL AMOUNT	DATE DEBT	CUMULATIVE PAID	OUTSTANDING BALANCE THIS
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